PTO:S8/01 [03-01]
Approved for use through 10/31/2002. ONB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Raduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)		Attorney Dock t	Attorney Dock t Number							
		First Nam d Inve	First Nam d Inventor		con					
		COM	COMPLETE IF KNOWN							
		Application Numb	er							
+ Declaration	Declaration	Filing Date								
Submitted OR with Initial Filing	Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)	Group Art Unit								
		Examiner Name								
As a below named inventor, I hereby declare that:										
My residence, mailing address, and citizenship are as stated below next to my name.										
I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural										
names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:										
RETENTION APPARATUS AND METHOD FOR STABILIZING CONCRETE FORMS										
FOR SIMBIBIZING CONCRETE FORES										
(Title of the Invention)										
the specification of which										
± is attached hereto										
OR CONTRACTOR OF THE PROPERTY										
was filed on (MM/DD/YYYY) as United States Application Number or PCT International										
Application Number	and was an	nended on (MM/DD/YYY	2		(if applicable).					
фиционтинов			(ii applicable).							
I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as										
amended by any amendment specifically referred to above.										
I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation- in-part applications, material information which became available between the filing date of the prior application and the national or PCT infernational filing date of the continuation-in-part application.										
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificatels), or 365(b) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for										
than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the										
application on which priority is claimed.  Prior Foreign Application Foreign Filing Date Priority Certified Copy Attached?										
Number(s)	Country	(MM/DD/YYYY)	Not Claim		NO					
			Ц		Ц					
		ł	Щ		$\sqsubseteq$					
		{			Ш					
*										
Additional foreign application numbers ar list d on a supplemental priority data sh. t PTO/SB/02B attached h. reto:										

[Pag 1 of 2]

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Officer, Washington, OC 20231. DO NOT SEND FEES SOR COMPLETED FORMS TO THIS ADDRESS SEND TO: Assistant Commissioner for Patents, Washington, OC 20231.

PTO/S8/01 (03-01)
Approved for use through 10/31/2002, OMB 651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

## **DECLARATION** — Utility or Design Patent Application

0.410.00.00.00.00.00.00.00.00.00.00.00

Direct all correspondence to: + Customer Number or Bar Code Label 29741 OR Corr spondence address below									
PATENT TRADEMARK OFFICE									
Name									
Address									
City	State			ZIP					
Country	none			Fax					
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.									
NAME OF SOLE OR FIRST INVENTOR: A petition has been filed for this unsigned inventor									
Given Name (first and middle [if any]) Robert				Family Name or Sumame Rascon					
Inventor's Part Caren Date 09-23-03									
Residence: City San Jose		State CA		Country U.S.A.	Citizenship U.S.A.				
Mailing Address 72 Alexander Avenue									
City San Jose		State CA		ZIP 95116	Country U.S.A.				
IAME OF SECOND INVENTOR: A petition has been filed for this unsigned inventor									
Given Name (first and middle [if any])			Family Name or Sumame						
Inventor's Signature					Date				
Residence: City		State		Country	Citizenship				
Mailing Address									
	T		$\neg$						
City		State		ZIP	Country				
Additional inventors are being named on thesupplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.									